	_		Docket Number	FR / 121 DIV 1		
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14023		EV305489589US Express Mail Label Number		February 13, 2004 Date of Deposit	 s. PTO 9539	
US PTO	Address to:	Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450			15439 U	02130

UTILITY PATENT APPLICATION TRANSMITTAL AND FEE SHEET

Transmitted herewith for filing under 37 CFR §1.53(b)(1) is a **divisional** of prior Application No. 09/811,233, filed March 16, 2001.

Applicant (or identifier):		DUAN ET AL.
Title:		CYCLIC $\beta\textsc{-}\textsc{-}\textsc{AMINO}$ ACID DERIVATIVES AS INHIBITORS OF MATRIX METALLOPROTEASES AND TNF- α
Enclosed	d are:	
1. \(\sum \) 2. \(\sum \) 3.	Drawings - Declaration an a. Newl b. Copy signe i. S	eletion of Inventors igned statement attached deleting inventor(s) named in the prior
4.	Incorporation E The entire disc and Power of	oplication By Reference Blosure of the prior application, from which a copy of the Declaration Attorney is supplied under Box 3b, is considered as being part of the ne accompanying application and is hereby incorporated by reference
5.	Microfiche Cor Nucleotide and Computer Paper Co	nputer Program (appendix) d/or Amino Acid Sequence Submission Readable Copy by t Verifying Identity of Above Copies
7.	Preliminary An Assignment Pa English Transl Information Dis	nendment apers (Cover Sheet & Document(s)) ation of sclosure Statement of Priority Document(s)
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The right to elect an invention or species that is different from that elected in parent Application No. 09/811,233 in the event of a restriction or election of species requirement that is identical or substantially similar to that made in said parent application is hereby reserved.

Filing fee calculation:

Before calculating the filing fee, please enter the enclosed Preliminary Amend	ment.
Before calculating the filing fee, please cancel claims .	

Basic Fil	ing Fee								\$ 770
Multiple	ultiple Dependent Claim Fee (\$ 290)							•	\$
Foreign I	Foreign Language Surcharge (\$ 130)							\$	
	For	Number Filed		Number Extra			Rate		
Extra Claims	Total Claims	10	-20	0	x	\$	18	=	\$ •
	Independent Claims	1	-3	0	х	\$	86	Ш	\$
	TOTAL FILING						FEE	\$ 770	

Please charge Deposit Account No. 19-3880 in the name of Bristol-Myers Squibb Company in the amount of \$770. An additional copy of this paper is enclosed. The Commissioner is hereby authorized to charge any additional fees under 37 CFR §1.16 and §1.17 which may be required in connection with this application, or credit any overpayment, to Deposit Account No. 19-3880 in the name of Bristol-Myers Squibb Company.

Please address all correspondence to the address associated with Customer No. 23914, which is currently:

Stephen B. Davis Bristol-Myers Squibb Company Patent Department P.O. Box 4000 Princeton, NJ 08543-4000

Date: February 13, 2004

Please direct all telephone calls to the undersigned at the number given below and all telefaxes to (609) 252-4526.

Respectfully submitted,

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